

**WITHDRAWAL
NOTIFICATION FORM**

According to ARS 15-802.C., the county school superintendent must be notified within thirty days of the termination that the child is no longer being instructed at a private school.

DATE_____

PRIVATE SCHOOL NAME_____

Child Name_____Date of Birth_____

Parent Name_____Telephone_____

Address_____City_____Zip_____

.....
ENROLLED IN PUBLIC OR CHARTER SCHOOL_____

.....
Please indicate if you decided to Home School_____

A home school affidavit form and information packet will be mailed to you.

.....
Please indicate if your child has reached the age of 16_____

.....

I have withdrawn my child from the above named private school.

Parent Signature_____

Please send this form to:
Dr. Sandra E. Dowling, Maricopa County School Superintendent